

**UNITED STATES BANKRUPTCY COURT, SOUTHERN DISTRICT OF FLORIDA**  
**CHAPTER 13 PLAN (Individual Adjustment of Debts)** [www.flsb.uscourts.gov](http://www.flsb.uscourts.gov)

- ☐ \_\_\_\_\_ Amended Plan (Indicate 1<sup>st</sup>, 2<sup>nd</sup>, etc. amended, if applicable)  
☐ \_\_\_\_\_ Modified Plan (Indicate 1<sup>st</sup>, 2<sup>nd</sup>, etc. amended, if applicable)

DEBTOR: \_\_\_\_\_ JOINT DEBTOR \_\_\_\_\_ CASE NO.: \_\_\_\_\_  
Last Four Digits of SS# \_\_\_\_\_ Last Four Digits of SS# \_\_\_\_\_

☐ This document is a plan summary. Additional data on file in clerk's office attached to original plan.

**MONTHLY PLAN PAYMENT:** Including trustee's fee not to exceed 10% and beginning 30 days from filing/conversion date, Debtor(s) to pay to the trustee for a period of \_\_\_\_\_ months:

- A. \$ \_\_\_\_\_ for months \_\_\_\_\_ to \_\_\_\_\_;  
B. \$ \_\_\_\_\_ for months \_\_\_\_\_ to \_\_\_\_\_;  
C. \$ \_\_\_\_\_ for months \_\_\_\_\_ to \_\_\_\_\_; in order to pay the following creditors:

Administrative: Attorney's Fee - \$ \_\_\_\_\_ TOTAL PAID \$ \_\_\_\_\_  
Balance Due \$ \_\_\_\_\_ payable \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)

Secured Creditors: [Retain Liens pursuant to 11 USC § 1325 (a)(5)] Mortgage(s)/Liens on Real or Personal Property:

1. \_\_\_\_\_ Arrearage on Petition Date \$ \_\_\_\_\_  
Arrears Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)  
Regular Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)
2. \_\_\_\_\_ Arrearage on Petition Date \$ \_\_\_\_\_  
Arrears Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)  
Regular Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)
3. \_\_\_\_\_ Arrearage on Petition Date \$ \_\_\_\_\_  
Arrears Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)  
Regular Payment \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_)

**IF YOU ARE A SECURED CREDITOR LISTED BELOW, THE PLAN SEEKS TO VALUE THE COLLATERAL SECURING YOUR CLAIM IN THE AMOUNT INDICATED. A SEPARATE MOTION (UTILIZING LOCAL FORM "MOTION TO VALUE COLLATERAL IN PLAN") WILL ALSO BE SERVED ON YOU PURSUANT TO BR 7004 AND LR 3015-3.**

Secured Creditor	Description of Collateral and Value of Collateral	Interest Rate	Plan Payments	Months of Payment	Total Plan Payments
	\$ _____	%	\$ _____	_____ To _____	
	\$ _____	%	\$ _____	_____ To _____	
	\$ _____	%	\$ _____	_____ To _____	

Priority Creditors: [including non-dischargeable debts paid 100% in plan]

1. \_\_\_\_\_ Total Due \$ \_\_\_\_\_  
Payable \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_) Regular Payment \$ \_\_\_\_\_
2. \_\_\_\_\_ Total Due \$ \_\_\_\_\_  
Payable \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_) Regular Payment \$ \_\_\_\_\_

Unsecured Creditors: Pay \$ \_\_\_\_\_/month (Months \_\_\_\_\_ to \_\_\_\_\_).

Pro rata dividend will be calculated by the Trustee upon review of filed claims after bar date.

Other Provisions Not Included Above:

I declare that the foregoing chapter 13 plan is true and correct under penalty of perjury.

\_\_\_\_\_  
Debtor  
Date: \_\_\_\_\_

\_\_\_\_\_  
Joint Debtor  
Date: \_\_\_\_\_